



Adoption of Business Associate Contract

Employer/Prospective Member of CHC (the participating unit) first reviews the Notice of Privacy Practices and then completes, and signs, the Business Associate Contract.

_____ (herein after referred to as the participating unit)
herein adopts the terms and provisions of the Business Associate Contract between Cooperative Health Choices of Western Wisconsin and Carol Bulman, CHC Temporary HIPAA Officer, dated _____, 2009.

The participating unit agrees to comply with all the terms and provisions of the said contract and will not disclose protected health information (as defined under the Health Insurance Portability and Accountability Act) unless permitted or required by the Business Associate Contract or otherwise required by law.

The participating unit further agrees to abide by and comply with legally adopted revisions, amendments, and changes in said Contract.

Dated

Participating Unit

Title